

Transitional Assistance Acceptance Letter

[Date]

[Member Name]

[Member Address]

[City, State Zip]

Dear [insert name]:

The Centers for Medicare & Medicaid Services (CMS), the federal agency that runs Medicare, has approved your application for a credit of \$600 in 2004 and a separate \$600 credit for 2005 to be used toward the purchase of prescription drugs. This credit is in addition to all other discounts you are entitled to as a member of [insert plan name here] and does not affect your membership in [insert plan name here].

You may begin using the first \$600 credit on [insert effective date]. You will be responsible for only [10% or 5%] of the discounted cost of your prescription drugs that are covered under this program until you use all of the \$600 credit.

If you do not use up this credit in 2004, the remaining balance will automatically rollover for your use in 2005. If you do use all of \$600 credit during 2004, you will then be responsible for the full discounted cost of your prescription drugs.

To use your credit, simply present your [insert plan name here] membership card when picking up prescriptions. Your credit can only be used at one of the [insert plan name here] network pharmacies. Each time you get a prescription filled, you can ask the pharmacy to tell you how much money remains from your credit. Or you can call [insert plan name] Customer Service Center at the number indicated below.

Where may I get more information?

- Refer to your [insert plan name] Medicare-approved Drug Discount Card Handbook, provider directory, or Preferred Drug List.
- Call our Customer Service Center between [insert plan hours of operation] at 1-800-xxx-xxxx (TTY users should call (800) 349-3538).
- Visit our web site at: [Insert plan web address]
- Or, if you have general questions about the Medicare approved discount drug card, you should call **1-800-MEDICARE (1-800-633-4227)**. (TTY users should call 1-877-486-2048).

We look forward to serving you now and in the future.

Sincerely,

[Plan name]